## 01-29-07

PTO/SB/21 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/658,055 Filing Date September 8, 2003 First Named Inventor Kevin R. CURTIS Art Unit 2872 **Examiner Name** A. Chang Attorney Docket Number 495812004700

ENCLOSURES (Check all that apply)							
	mittal Form (original + copy essing (2 pages))	Drawing(s)		After Allowance Communication to TC			
Fee .	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendme	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After	Final	Petition to Convert to a Provisional Application		Proprietary Information			
Affid	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence A		Status Letter			
Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):			
Express Al	bandonment Request	Request for Refund		<ul><li>PTO/SB/08a/b (1 page)</li><li>Return Receipt Postcard</li></ul>			
x Information Disclosure Statement (Supplemental) (3 pages)		CD, Number of CD(s)					
Certified C	opy of Priority (s)	Landscape Table on C	CD				
	lissing Parts/ Application	Remarks					
	y to Missing Parts under FR 1.52 or 1.53						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	MORRISON & FOE	RSTER LLP (Customer No. 25226)					
Signature	Signature						
Printed name	inted name Christopher B. Eide						
Date	January <b>75</b> , 2007 Reg. No. 48,375						

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	leposited with the U.S. Postal Service as Expre Amendment, Commissioner for Patents, P.O. I	ess Mail, Airbill No. EV534441500US, on the date shown Box 1450, Alexandria, VA 22313-1450.
Dated: January 35, 2007	Signature:	(Lori Sims)

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PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/658,055 **Application Number** Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). September 8, 2003 TRANSMITTAL Filing Date Kevin R. CURTIS First Named Inventor For FY 2006 **Examiner Name** A. Chang 2872 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 495812004700 **TOTAL AMOUNT OF PAYMENT** 180.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP x Deposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee x Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 0.00 200 100 100 50 130 Design 65 0.00 Plant 200 100 300 150 160 80 0.00 Reissue 300 150 500 250 600 300 0.00 Provisional 200 100 0 0.00 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 25 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** - 120 = 0 x 50.00 0.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. 360.00 0.00 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 0 x 200.00 0.00 - 10 = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Extra Sheets Fee (\$) 250.00 0.00 (round up to a whole number) x - 100 = /50 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY Registration No. Signature 48,375 Telephone (650) 813-5720 (Attomey/Agent) Christopher B. Eide Name (Print/Type) Date 2007 , کی ہے January

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 534441500 US, on the date shown below in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: January 25, 2007 Signature:

Patent Docket No. 495812004700

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Kevin R. CURTIS et al.

Serial No.: 10/658,055

Filing Date: September 8, 2003

METHODS FOR IMPLEMENTING PAGE BASED HOLOGRAPHIC ROM

RECORDING AND READING

Examiner: A. Chang

Group Art Unit: 2872

## SUPPLEMENTAL INFORMATION DISCLOSURE **STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98**

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. §1.97 and § 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. The Examiner is requested to make these documents of record.

This Supplemental Information Disclosure Statement is submitted:

With the application; accordingly, no fee or separate requirements are required.
Before the mailing of a first Office Action after the filing of a Request for Continued
Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97
(e)(1) has been provided.

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	Within	in three months of the application filing date or before mailing of a first Office Action			
	on the	merits; accordingly, no fee or separate requirements are required. However, if			
	applic	able, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.			
$\boxtimes$	After	receipt of a first Office Action on the merits but before mailing of a final Office Action			
	or Not	tice of Allowance.			
		A fee is required. A check in the amount of is enclosed.			
	$\boxtimes$	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to			
		this submission in duplicate.			
		A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is			
		believed to be due.			
	After	mailing of a final Office Action or Notice of Allowance, but before payment of the			
	issue	fee.			
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the			
		amount of is enclosed.			
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal			
		form (PTO/SB/17 is attached to this submission in duplicate.)			

Applicants would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicants petition for any required relief including

Application Serial No. 10/658,055



Patent Docket No. 495812004700

extensions of time and authorize the Commissioner to charge the cost of such petition and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing 495812004700.

Dated: January 25, 2007

Respectfully submitted,

Christopher B. Eide

Registration No.: 48,375

MORRISON & FOERSTER LLP 755 Page Mill Road

Palo Alto, California 94304-1018

(650) 813-5720



Complete if Known Substitute for form 1449/PTO Application Number 10/658,055 INFORMATION DISCLOSURE Filing Date September 8, 2003 Kevin R. CURTIS First Named Inventor STATEMENT BY APPLICANT Art Unit 2872 (Use as many sheets as necessary) Examiner Name A. Chang 495812004700 1 of 1 Attorney Docket Number Sheet

		·	U.S. PA	TENT DOCUMENTS	
Examiner   Cite		Document Number  Number-Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	1.	US-3,644,012	02-22-1972	Brooks	
	2.	US-3,758,186	09-11-1973	Brumm ·	
	3.	US-4,988,153	01-29-1991	Paek	
	4.	US-5,422,746-A	06-06-1995	Aharoni et al.	

FOREIGN PATENT DOCUMENTS						
Examiner	Cite	Foreign Patent Document	Publication	Name of Patentee or	Pages, Columns, Lines,	
Initials*	No.1	Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)	Date MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>

\*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). See Kinds Codes of USPTO Patient Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. There office that issued the document, by the two-letter code (WIPO Standard ST.3). For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the patent document. In indication of the year of the reign of the Emperor must precede the serial number of the year of the reign of the Emperor must precede the serial number of the year of the reign of the Emperor must precede the serial number of the year of the reign of the Emperor must precede the year of the year of the year of the year

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No. <sup>1</sup>	Include name of the author ( in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		and or destray whore pasiented.	<u> </u>

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	 Date	1
Signature	Considered	

<sup>&</sup>lt;sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.